

BOULDER POLICE DEPARTMENT PERSONAL HISTORY STATEMENT

Instructions and Advisements

Complete every item by hand printing in black ink or typewritten. If an item does not apply to you, so indicate with N/A. Sign where required. If you need additional space, use the back of the specific page in which the information is required. All addresses must be complete. All phone numbers require an area code. Any falsifications, misstatements, or omissions may disqualify you. The truthfulness of all information supplied to the Boulder Police Department will be a subject of a computerized voice stress analysis (CVSA) test.

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FOR SUPPORT & STAFF SERVICES USE ONLY

Upon initial review,

- ☐ Personal history statement appears complete, continue in process.
- ☐ Personal history statement incomplete.

Staff member inspecting

Personal, Spouse, Family

- 1) Name (Last, First, Middle Initial): _____
- 2) ☐ Male ☐ Female
- 3) Aliases, Nicknames, Maiden Name, Other Names Used: _____
- 4) Social Security Number: _____ 5) DOB (Month/Day/Year): _____
- 6) Place of Birth (City, County, State, County): _____
- 7) Height: _____ 8) Weight: _____ 9) Eye Color: _____ 10) Hair Color: _____
- 11) Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed
- 12) Name of Spouse or Significant Other: _____
- 13) Date and place of birth: _____
- 14) Address of Spouse/Significant Other: _____
- 15) Home Phone: _____ 16) Work Phone: _____
- 17) Spouse/Significant Other Occupation and, _____
- 18) Place of work (firm name, address): _____
- 19) Names, Addresses, Phone Numbers of Previous Spouses: _____
- 20) List all your children, including step and adopted, and provide the listed information:
- | Name | Date/Place of Birth | Address | Living with Whom (if minor) | Supported by (if minor) |
|-------|---------------------|---------|-----------------------------|-------------------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
- 21) Have you ever been ordered by the courts to pay child support or alimony? ☐ Yes ☐ No
- 22) Have you ever been delinquent in these payments? ☐ Yes ☐ No

Dependents, Education

- 23)** If you claim tax exemptions for support of other dependents other than spouse and children, provide the following information:

Name	Address	Relationship	Percent Support Provided
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- 24)** List all high schools attended:

Name of School	Location	Dates Attended	Graduated (Y or N)
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If GED, give number, location, and date: _____

- 25)** List all colleges and universities attended, attach copies of transcripts, degrees:

Name of college	Location	Dates Attended	Semester Hours Earned	Degree Awarded/GPA
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- 26)** Other schools or training (trade business, military, etc.) List the name and location of the school, class title, dates attended, subjects studied, certificate awarded, and other pertinent information.

- 27)** Indicate types of special licenses (such as pilot, radio, etc.,) showing licensing authority, and date of expiration.

- 28)** Special skills you possess and equipment you can use (for example: sign language, word processor, etc.)

Address History, Family

- 29)** List all addresses for the past ten years with your present address (include duty stations if in the military and or dormitories while in college.)

From-To Month/Year	Street Address Apt#	City/State/Zip	Owned/Rented	Landlord Name & Phone #
_____ Present	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Names of others living in current residence:

- 30)** List your family members including parents, guardians, step-parents, foster parents, parents-in-law, brothers and sisters, brothers and sister-in-law (even if deceased.) List any other family members you have resided with or with whom a close relationship existed or exists.

Relationship	Name	Address (if living)	Area Code & Phone #
Father	_____	_____	_____
Mother	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

- 31)** Has any member of your immediate family, or any person residing with you ever been arrested or convicted of a felony offense? ☐ Yes ☐ No If "Yes", give particulars below, including name, relationship, offense, date, law enforcement agency involved, etc.

References

- 32) References. List the names of five persons not related to you excluding former employers, who have known you very well for at least three years. All persons listed may be asked to appraise your character, ability, experience, personality, and other factors.

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Name: _____ Address: _____

Occupation: _____ Business Address: _____

Years Known: _____ How did you become acquainted?: _____

Home Phone (area code & #): _____ Work Phone (area code & #): _____

Military, Work History

33) Have you ever served in the U.S. Armed Forces? ☐ Yes ☐ No Type of discharge: _____

List all bases and stations you have served at:

34) Are you presently a member of the U.S. Reserve National or State Guard organization? ☐ Yes ☐ No
If "Yes", complete the following:

35) Grade and service: _____ Branch of service: _____

36) Organization and station or unit number and location: _____

37) Indicate Reserve obligation, if any: _____

38) Were you ever court-martialed, tried on charges, or were you the subject of a summary court, deck court, captain's mast or company punishment, or any other disciplinary action while a member of the armed forces (including Reserves, National Guard, etc.) ☐ Yes ☐ No

If "Yes", give details below:

39) List all jobs you have had in the last ten years. List your present or most recent job first, and prior jobs in reverse chronological order.

From _____ to _____ Average hours worked per week: _____

Starting salary & position/title: _____

Ending salary & position/title: _____

Name, address, and phone # (including area code) of employer: _____

List your duties and responsibilities:

Name and title of your supervisor: _____

Awards, commendations, noteworthy accomplishments:

Warnings, disciplinary actions, investigations of misconduct, reprimands:

Were you fired or forced to leave? _____ Reason for leaving:

Work History (cont'd)

From _____ to _____ Average hours worked per week: _____

Starting salary & position/title: _____

Ending salary & position/title: _____

Name, address, and phone # (including area code) of employer: _____

List your duties and responsibilities:

Name and title of your supervisor: _____

Awards, commendations, noteworthy accomplishments:

Warnings, disciplinary actions, investigations of misconduct, reprimands:

Were you fired or forced to leave? _____ Reason for leaving:

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Warnings, disciplinary actions, investigations of misconduct, reprimands:

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Awards, commendations, noteworthy accomplishments:

Warnings, disciplinary actions, investigations of misconduct, reprimands:

Were you fired or forced to leave? _____ Reason for leaving:

From _____ to _____ Average hours worked per week: _____

Starting salary & position/title: _____

Ending salary & position/title: _____

Name, address, and phone # (including area code) of employer: _____

List your duties and responsibilities:

Name and title of your supervisor: _____

Awards, commendations, noteworthy accomplishments:

Warnings, disciplinary actions, investigations of misconduct, reprimands:

Were you fired or forced to leave? _____ Reason for leaving:

Police Certification, Applications

40) Are you a state certified police officer? ☐ Yes ☐ No

Issuing date:

41) Certificate number: _____

Date issued: _____

42) List all police academies ever attended:

Name of academy	Address	Phone number	Dates of Attendance	If not completed, reason
-----------------	---------	--------------	---------------------	--------------------------

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

43) Have you ever previously submitted an application with the Boulder Police Department or the City of Boulder?

☐ Yes ☐ No If "Yes", please list the approximate dates, the position(s) applied for, and the disposition of that application.

44) List all of the law enforcement, police, or investigative agencies you have applied for, the approximate dates, and the dispositions of those applications.

Driving History, Vehicles

45) Driver's license number and state: _____ Expiration date: _____

46) What other states have you had a driver's license in?:

47) Have you ever been refused a driver's license by any state?: ☐ Yes ☐ No If "Yes", give details:

48) Have you ever had a driver's license suspended or revoked?: ☐ Yes ☐ No If "Yes", by which state, date, and details:

When was your license reinstated?: _____

49) Have you been involved in a motor vehicle accident in the last ten years? ☐ Yes ☐ No If "Yes", list complete details, dates, locations, injury or non-injury, police agency investigating, report number, cause of accident, and who was at fault:

50) List all of the traffic citations you have received in the last three years:

Location	Issuing agency	Approx. Date	Violation	Disposition
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

51) List all vehicles owned:

Make	Model	Year	License # & state	Insurance company name & address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Conduct

- 52)** Have you committed any misdemeanors in the last three years, including but not limited to the following: driving under the influence of drugs or alcohol; harassment; disorderly conduct; theft under \$500; domestic violence; assault without deadly weapon; possession, use or sale of marijuana or its derivatives; criminal mischief under \$500; trespassing ☐ Yes ☐ No

If “Yes”, give the details below:

If other, describe:

- 53)** Have you committed any felonies in the last five years, including but not limited to the following: driving under the influence of drugs or alcohol; arson; burglary; assault with deadly weapon; robbery; auto theft; forgery/fraud; criminal mischief over \$500; theft over \$500; possession, use or sale of illegal substances, other than marijuana or its derivatives, (i.e., barbiturates, amphetamines, hallucinogenic, cocaine, heroin, LSD, PCP) ☐ Yes ☐ No

If “Yes”, give the details below:

If other, describe:

- 54)** Since the age of eighteen, have you been convicted of any non-traffic misdemeanors or felonies? ☐ Yes ☐ No
If “Yes”, complete the following:

- 55)** Since the age of eighteen, have you ever used excessive physical force against another person? (If applying for a civilian position, this question does not need to be answered.) ☐ Yes ☐ No If “Yes”, give details below:

- 56)** Have you ever been adjudicated as a delinquent in juvenile court? ☐ Yes ☐ No If “Yes”, give details below:

- 57)** Have you ever written checks which were returned for insufficient funds? ☐ Yes ☐ No If “Yes”, give details below:

Financial Background

(If applying for a civilian position other than in Property & Evidence,
this question does not need to be answered.)

58) Financial background:

Your monthly income: _____

Spouse's monthly income: _____

Other monthly income: _____

Source: _____

Monthly rent: _____

Monthly mortgage (PITT): _____

Mortgage company and balance: _____

Monthly car insurance: _____

Monthly child support: _____

Other monthly payments: _____

Total from list below: _____

Debts

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Financial Background (cont'd)

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of creditor: _____ Acct#: _____

Address: _____ Type of business: _____

Security: _____

Amount owed: _____ Monthly payment: _____

Name of bank: _____ Address: _____

Checking acct#: _____ Balance: _____

Savings acct#: _____ Balance: _____

Name of bank: _____ Address: _____

Checking acct#: _____ Balance: _____

Savings acct#: _____ Balance: _____

59) Has your credit ever been considered unsatisfactory or have you been refused credit?: ☐ Yes ☐ No If "Yes", give date and circumstances.

60) Have you ever declared bankruptcy?: ☐ Yes ☐ No If "Yes", give date and circumstances.

Firearms, Associations, Statement

(If applying for a civilian position, the firearms question do not need to be answered)

- 61) Have you had any training in the use of firearms (other than at police academies listed previously?) ☐ Yes ☐ No If "Yes", complete the following:

Training type	Given by	Dates of training	Standard met
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 62) Do you have federal firearms license?: ☐ Yes ☐ No If "Yes", license #:

Do you have a concealed weapons permit?: ☐ Yes ☐ No If "Yes", permit #:

Issuing authority:

- 63) Are you now or have you ever been a member of any organization, association, movement, group, or combination of persons which advocates the overthrow of our constitutional form of government, or which has adopted the policy of advocating or approving the commission of force or violence to deny other persons their rights under the Constitution of the United States or which seeks to alter the form of government of the United States by unconstitutional means?: ☐ Yes ☐ No

- 64) Are you now or have you ever been affiliated with any organization of the type described above, as an agent, official, or employee?: ☐ Yes ☐ No

- 65) List any friends or relatives employed by the City of Boulder and their relationship to you:

- 66) I certify that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers, and that the entries made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I hereby authorize my former employers to give information regarding my employment with them, and in addition, to furnish any other information regarding myself. I further agree and consent in advance to being summarily discharged without cause or hearing if any of the above information contains any willful misrepresentation or falsification or if any information has been omitted. I agree to take a computer voice stress analysis at any time before employment. I further understand that if I am accepted for a position, I shall be in a probationary period during which time I can be discharged without cause for my failure to fulfill the requirements of the position and have no right to a formal appeal.

Signature of Applicant

Date

Signature of Witness

Date